PART B - FEE(S) TRANSMITTAL

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLICATION FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.1563). CTR 1.363). Change of correspondence address or Change of Correspondence Address in indication form PTO/SB/122) attached. CTR 1.363). Change of correspondence address (or Change of Correspondence Address in indication form PTO/SB/122) attached. The Address' indication for "Fee Address" Indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. Address in microspondence address for Change of Correspondence address indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. The Address' indication for "Fee Address" indication form PTO/SB/122) attached. The Address' indication for "Fee Address in Indication form PTO/SB/122) attached. The Address' indication for "Fee Address in Indication form PTO/SB/122) attached. The Address in Indication for "Fee Address in Indication form PTO/SB/122) attached. The Address in Indication for "Fee Address in Indication form PTO/SB/122) attached. The Address in Indication for "Fee	Complete and send	this form, together w	ith applicable fe	e(s), to: Mail	Mail Stop ISSUE	FEE		
INSTRUCTIONS: 160 from should be deed for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks I through 5 should be completed with preparate All from the proposed partial part of the current correspondence address and profit of the current correspondence address. And for (b) indicating a separate FEE ADDRESS (Note, the Book I for any shapes of address). CLEARNT CORRISONENCE ADDRESS (Note, the Book I for any shapes of address). CLEARNT CORRISONENCE ADDRESS (Note, the Book I for any shapes of address). CLEARNT CORRISONENCE ADDRESS (Note, the Book I for any shapes of address). SOFER & HAROUN, LLP 317 masmittal. This certificate of maining on transmission. There is no contributed of maining or transmission. There is no contributed on the USPTO (571) 273-2855, on the date indicated device. The proposed of the USPTO (571) 273-2855, on the date indicated observed to the USPTO (57		₹,\			P.O. Box 1450			
INSTRUCTION TO THE CONTRIBUTION OF THE CONTRIB	2 00	T 15 7000		or For	Alexandria, Virg	inia 22313-1450	.172	
OXARDY CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) OXARDY CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) OXARDY CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) For CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) For CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) For CORRESTONDENCE ADDRESS (Nose the Book I for any change of address) For CORRESTONDENCE ADDRESS (Nose the Book I for any change of address (any change of transmission) Certificate of Mailing or transmission Certificate of Mailing or	' <i>'</i> '	;			•	,		
ORAPHI CREATION INC. A certificate of mailing on only be used for democite untiling of Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International paper, such as an assignment or formal drawing, in Percy International Percy Inter	appropriate. All further direspondence of cluding the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as							
Fee(s) Transmitted. This certificate cannot be used for any other accompany papers. Each additional papers, such as an assignment or formal drawing, in papers. Each additional papers, such as an assignment or formal drawing, in papers. Each additional papers, such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers such as an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing, in papers. Each additional papers are an assignment or formal drawing and an assignment. In papers or the patent. If an assignment is identified below, the document has been filed recordation as self orth in 37 CFR 3.11. Completion of this ms is NOTE. Dubes an assignment is identified below, the document has been filed recordation as self orth in 37 CFR 3.11. Completion of this ms is NOTE. Dubes and papers or the patent. If an assignment is identified below, the document has been filed recordation as self orth in 37 CFR 3.11. Completion of this ms is NOTE. Dubes and assignment is identified below, the document has been filed recordation as self orth in 37 CFR 3.11. Completion of this ms is NOTE. PATENT (Finit or t	mulcated unless corrected manufacture otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.							
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. O9/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. O9/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. O9/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLIN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Clauge of correspondence address or indication of "Fee Address" (37 CFE 1.56)	Fee(s) Transmittal. This certificate cannot be used for any other a							
SUITE 910 NEW YORK, NY 10017 States Postal Service with sufficient postage for first class mail in an environment of the USPTO (571) 273-2885, on the date indicated below. Valentina Gijin VALENTINA GJINV Cictober 16, 2009 AFPLICATION NO. FILING DATE FIRST NAMED INVENTOR APPLICATION NO. FILING DATE FIRST NAMED INVENTOR AFPLICATION NO. FILING DATE AFPLICATION NO. FILING DATE FIRST NAMED INVENTOR AFPLICATION FIRST NOTE: The same and the indicated below. Askiniro Urano 773-008 S099 TITLE OF INVENTION: APPLICATION FIRST NAME AND CONFIRMATION NO. ASSOCIATED THE SMALL ENTITY SSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE ACTER 1.63). 1. Clasage of correspondence address or indication of "Fee Address" (37 CFR 1.63). 1. Clasage of correspondence address or or indication of "Fee Address" (37 CFR 1.63). 1. Clasage of correspondence address or or Clauge of Correspondence Address form PTO/SN122) attached. 1. Clasage of correspondence address or or Clauge of Correspondence Address form PTO/SN122) attached. 1. Clasage of correspondence address or Clauge of Correspondence Address indication of "Fee Address" (37 CFR 1.63). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents. If no names of up to 5 registered patent attorneys or agents. If no names of up to 5 registered patent attorneys or agents. If no names of up to 5 registered patent interneys or negents. If no names of up to 6 registered patent interneys or negents. If no names of up to 6 registered patent interneys or negents. If no names of up to 7 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 registered patent interneys or negents. If no names of up to 2 r	SOFER & HAROUN, LLP Certificate of Mailing or Transmission							
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/602/409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS Change of correspondence address or indication of "Fee Address" (37 CFR 1.56). Change of correspondence address or indication form provisional none of "Fee Address" indication form provision of "Fee Address" indication form provision in the patent front page, list (1) the names of up to 3 registered patent attorneys or agent SIR, alternatively, or agents OR, alternatively, or agents OR, alternatively or agent SIR, and the names of up to 3 registered attorney or agent of the names of up to 3 registered patent attorneys or agent of the names of up to 3 registered patent attorneys or agent SIR, and the names of up to 3 registered attorney or agent SIR, and the names of up to 3 registered patent attorneys or agent SIR, and the names of up to 3 registered patent attorneys or agent SIR no name is 1 soften (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is 3 siled, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, up assignee data will appear on the patent. If an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) is enclosed. Payment by credit card, Form PTO-2038 is attached. Payment by credit card, Form PTO-2038 is attached. Payment by credit card, Form PTO-2038 is attached.	SUITE 910				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.163). Change of correspondence address or indication of "Fee Address" (37 CFR 1.163). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address indication of "Fee Address" Indication form PTO/SB/122, attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Address indication of "Fee Address" Indication for "POSSB/122) attached. The Advance of a single firm (having as a member a registered attent attorneys or agents. If no name is a single firm (having as a member a present of persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name is a single firm (having as a member a persistent attorneys or agents. If no name				Valentina Gjini	(Depositor's name)			
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/602,409 06/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Clange of correspondence address or indication of "Fee Address" (37 CFR 1.563). Clange of correspondence address (or Change of Correspondence Address for PTO/SB/122) attached. "Fee Address" indication for "Pee Address" indication form PTO/SB/122) attached. "Fee Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122) attached. "The Address" indication for "Pee Address" indication form PTO/SB/122 attached. "The Address" indication for "Pee Address" indication form PTO/SB/122 attached. "The Address" indication for "Pee Address" indication form PTO/SB/122 attached. "The Address" indication for "Pee Address indication form PTO/SB/122 attached. "The Address" indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Address indication for "Pee Address indication form PTO/SB/122 attached. "The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Acc			/VALENTINA GJIN	(Signature)				
O9/602,409 O6/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 O \$1300 O6/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Change of correspondence address or indication of "Fee Address" (37 Clange of correspondence address (or Change of Correspondence Address indication form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. The Address indication for "Fee Address Indication form PTO/SB/122) attached. Tokyo, Japan Please check the appropriate assignee is identified below, no assignee data will appear on the patent. If an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the Patent of The Patent (and Patent): Actual Corporation or other private group entity Government of the Patent of the P					October 16, 2009		(Dutc)	
O9/602,409 O6/23/2000 Akihiro Urano 773-008 9099 TITLE OF INVENTION: APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 O \$1300 O6/16/2003 EXAMINER ART UNIT CLASS-SUBCLASS 1. Change of correspondence address or indication of "Fee Address" (37 Clange of correspondence address (or Change of Correspondence Address or Indication of "Fee Address" indication form PTO/SB/122) attached. The Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. The Address indication for "Fee Address" Indication form PTO/SB/122) attached. The Address indication of "Fee Address Indication form PTO/SB/122) attached. The Address indication of "Fee Address Indication form PTO/SB/122) attached. The Address indication of a Customer PTO/SB/122 (attached. The Address indication of a Customer PTO/SB/122) attached. The Address indication of a Customer PTO/SB/122 (attached. The Address indication of a Customer PTO/SB/122) attached. The Address indication of a Customer PTO/SB/122 (attached. To PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government Propersion of the Patent Propersion of the Fee(s): A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 O \$1300 O6/16/2003 EXAMINER	L	06/02/0000				<u> </u>		
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1300 0 \$1300 06/16/2003 ENAMINER ART UNIT CLASS-SUBCLASS 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.365). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address' indication (or "Fee Address" Indication form PTO/SB/122) attached. The Address' indication (or "Fee Address" Indication form Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Advance Order - # of Copies_ Deposit Account Number to Publication Fee (No small entity discount permitted) Chargestee place and the patent front page, list (1) the names of up to 3 registered patent attorneys or agents. If no name is 3. SOFER & HAROUN, LLP 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents. If no name is 3. SOFER & HAROUN, LLP 2. For printing on the patent front page, list (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is 3. SOFER & HAROUN, LLP 2. For printing on the patent front page, list (3) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is 3. SOFER & HAROUN, LLP 3. ASSIGNEE (3) the names of up to 4 pagents and the names of up to 4 pagents and the names of up to 4 pagents and the names of up to 4 pagents a	,							
Clange of correspondence address or indication of "Fee Address" (37 CPR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address from PTO/SB/122) attached. Classes of Address from PTO/SB/122) attached. Classes from PTO/SB/122 attached. Classes from PTO/SB/1222 attached. Classes from PTO/SB/1222 attached. Classes from PTO/SB/1222 attached. Class	AAAAMA SA TOO MAAAASA SA TOO MAAAAA AA							
Clange of correspondence address or indication of "Fee Address" (37 CPR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address from PTO/SB/122) attached. Classes of Address from PTO/SB/122) attached. Classes from PTO/SB/122 attached. Classes from PTO/SB/1222 attached. Classes from PTO/SB/1222 attached. Classes from PTO/SB/1222 attached. Class		•						
Clange of correspondence address or indication of "Fee Address" (37 Change of correspondence address (or Change of Correspondence (address) (or Change of Correspondence (or Special End of Correspondence (or	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
Clange of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address in Indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Sofer & HAROUN, LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 registered patent attorneys or agents) and the names of up to 2 registered patent attorneys or agents. If no name is 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CTY and STATE OR COUNTRY)	nonprovisional	NO	\$1300	I	·····	\$1300		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): A check in the anneount of the fee(s) is enclosed. Payment of Fee(s): A check in the anneount of the fee(s) is enclosed. Payment of Fee(s): The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number			· · · · · · · · · · · · · · · · · · ·			1	00/10/2000	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address of method of the patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents OR, alternatively, (3) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents OR, alternatively, (3) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (3) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (3) the names of up to 3 registered patent attorneys or agents OR. (4) the names of up to 3 registered patent attorneys or agents OR. (5) the names of up to 3 registered patent attorneys or agents OR. (6) the names of up to 3 registered patent attorneys or agents OR. (6) the names of up to 3 registered patent attorneys or agents OR. (6) the names of up to 3 registered patent attorneys or agents OR. (7) the names of up to 3 registered patent attorneys or agents OR. (8) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Individual Individual Individual Individual Individual In	EXAMINER		ART UNIT	CI	ASS-SUBCLASS			
CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address of mpto/SB/122 attached. The Address indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hitachi, Ltd. Please check the appropriate assignee category or categories (will not be printed on the patent): Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Advance Order - # of Copies Publication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122 attached. The Address form PTO/SB/142 attached. The Following fee(s) are enclosed: The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number.	SOFER & HAROUN, LLP							
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies		lence address (or Change of	Correspondence	or agents OR, alter	p to 3 registered pater natively,	at attorneys 1		
PIOSB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hitachi, Ltd. Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) are enclosed: 4b. Payment of Fee(s): I ssue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number			(2) the name of a stemistered attorney	ingle firm (having as a				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) are enclosed: At the following fee(s) are enclosed: I Issue Fee A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies _ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number	PTO/SB/47; Rev 03-02 o	of a Customer	2 registered patent	attorneys or agents. If				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s): At the following fee(s) are enclosed: Payment of Fee(s): A check in the amount of the fee(s) is enclosed: Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
Corporation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent):								
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governmental Corporation or other private group entity Covernmental Covernmental Corporation or other private group entity Covernmental C	recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
Please check the appropriate assignce category or categories (will not be printed on the patent):	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
4a. The following fee(s) are enclosed: I ssue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number	Hitachi, Ltd. Tokyo, Japan							
4a. The following fee(s) are enclosed: I Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
☐ A check in the amount of the fee(s) is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number								
Deposit Account Number					hereby authorized by charge the required fee(s), or credit any overpayment, to			
5. Change in Entity Status (from status indicated above)	Deposit Account Number							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademurk Office.	NOTE: The Issue Fee and Printerest as shown by the reco	ablication Fee (if required) words of the United States Pater	will not be accepted from and Trademark Of	om anyone other the	an the applicant; a regi	stered attorney or agent; or the	non identified above, ne assignee or other party in	
Authorized Signature /Joseph Sofer/ Date 10/15/2009				Date 10/15/2009				
Typed or printed name Joseph Sofer, Esq. Registration No. 34,438	Typed or printed name J	loseph Sofer, Esq.						
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Post 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								